File with: lowa Ethics and Campaign Disclosure Board 510 E. 12". Ste. 1A Des Moines, lowa 50319

Reset Form

JA ETHICS AND CARPAIGN PISCHOSURE EC

2009 OCT 29 AM II: 42

FOR INSTRUCTIONS, SEE BACK OF FORM

IMPORTANT: Indicate by # type of committee you are reporting for 16	Fax: 515-281-4073	DISCLOSURE SU	JMMARY PAGE			42
IMPORTANT: Indicate by # Upon of committee you are reporting for: [6] (1) Stateword: Egolative-Ludge Standing for Retention Candidate (2) State PAC (3) State Parry (1) Stateword: Egolative-Ludge Standing for Retention Candidate (3) State PAC (3) State Parry (1) County Pace (4) (4) County Candidate (4) (5) County Pace (4) (5) (10) State Office	OMMITTEE NAME (Must be	same as on Statement of Organization	tion)	コ		
Instruction (and the property of the committee you are reporting for. (6. 1) States of the property of the past of the property of the property of the past of the property of the property of the past of the past of the property of the past of the property of the past o	Bill Hooft City Council Ca	mpaign				
CANDIDATE COMMITTEES ONLY: Candidate Name Bill Horft District (if Senate or House) DATE SIGRED AM FILING A October 28, 2009 REPORT FOR (1) ELECTION (2)NON-ELECTION YEAR. Indicate by \$ [] Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.) STATEMENT OF CASH ON HAND SASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the test reporting period or must be zero it thus is first report field.) Schedule A: Cash Contributions total (Attach Schedule A) ('also see in-kind below) Schedule A: Cash Contributions total (Attach Schedule F) Schedule B: Losars Received total (Attach Schedule B) ("riso see debts and loans below) Schedule B: Losars Repayments total (Attach Schedule B) ("riso see debts and loans below) Schedule B: Losars Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report belance must be zero) SUB-TOTAL SUB-TATAL MONEY SPENT THIS PERIOD CASH ON HAND at the end of this reporting period (if final report belance must be zero) SUB-TOTAL SUB-TATAL MONEY Schedule B: Attach Schedule E: SUB-TATAL MONEY Schedule C: Attach Schedule E: SUB-TANDING LOANS (From Schedule C: Attach Schedule E: SUB-TANDING LOANS (From S	1 Statewide/Legislative/Judge & 4 County Central Committee (5 Subdivision Candidate (8 County Candidate ()	tanding for Retention Candidate (2)Sta)County Candidate (8)City Candidate	(7)School Board or Other Political	(Rev.	07/2007) ffice Use On	
District (if Senate or House) Audited Comiville City Council Audited Comiville City Council Audited Comiville City Council Audited Comiville City Council Audited City Coun	Candidate Name	DNLY:		Logge	nednl b	
AM FILING A October 28, 2009 REPORT TELEPHONE DATE SIGNED AM FILING A October 28, 2009 REPORT FOR (1) ELECTION /(2)MON-ELECTION YEAR. Indicate by # Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until s DR-3 is filed.) Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until s DR-3 is filed.) STATEMENT OF CASH ON HAND SASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the test reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) ('also see in-kind below) 2,545.00 Schedule A: Cash Contributions total (Attach Schedule F) 0.00 0.00 Schedule B: Loans Received total (Attach Schedule F) 0.00 0.00 Schedule B: Loans Received total (Attach Schedule B) ('also see debts and loans below) 1,431.54 0.00 Schedule B: Expenditures total (Attach Schedule B) ('also see debts and loans below) 1,431.54 0.00 0.00 Schedule B: Expenditures total (Attach Schedule B) ('also see debts and loans below) 1,431.54 0.00	Office Sought Corniville City Council		District (if Senate or House)			
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SUB-TOTAL \$ SUB-TOTAL \$ \$UB-TOTAL \$ \$UB-T		· · ·			V.UU	
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Schedule F: Loan Repayments total (Attach Schedule F)	4				1,431.54	
CASH ON HAND at the end of this reporting period (if final report balance must be zero) **UNPAID BILLS (From Schedule D - Attach Schedule D) IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) **OUTSTANDING LOANS (From Schedule F - Attach Schedule F) CONSULTANT BREAKDOWN (Schedule G Attached?) **CANDIDATE COMMITTEES ONLY:					0.00	
CASH ON HAND at the end of this reporting period (if final report balance must be zero) "UNPAID BILLS (From Schedule D - Attach Schedule D)					1.113.46	Audit
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) OUTSTANDING LOANS (From Schedule F - Attach Schedule F) CONSULTANT BREAKDOWN (Schedule G Attached?) CANDIDATE COMMITTEES ONLY:	CASH ON HAND at the end of	f this reporting period (if final report t	oalance must be zero)	,,		
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)						70
CONSULTANT BREAKDOWN (Schodule G Attached?) CANDIDATE COMMITTEES ONLY:	IN KIND CONTRIBUTIONS	From Schedule E - Attach Schedule	E)	5		<i>t</i> 8
CANDIDATE COMMITTEES ONLY:	OUTSTANDING LOANS (F	rom Schedule F - Attach Schedule F	}			
<u> </u>	CONSULTANT BREAKDOW	N (Schodule G Attached?)			YES	NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)					0.00	
STATE COMMITTEES: Submit a reconciled compaign account bank statement in January of each year.				•		

319-358-8952

For Instructions, See Back of Form	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	reset some 3	A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Bill Hoeft City Council Campaign			CK THIS BOX IF VOING FORM
	Į.	<u></u>	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE SOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 69B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE: (if applicable)	AMOUNT RECEIVED	FUND RAISER INCOME
5/12/09		Bill Hoeft 2307 muddy (reek La coralville) IA SZZYI	se I f	\$ 300	
5/18/09	1D# CK# 1355/ ₂	Jeff And Jill Do des 1400 12th Ave Coralville. IA 52241		250	
5118/09	ID# CK# 5975	Denise Zumbach 2301 Poplar St. Levalville In 52241		25	
6/5/09	ID# CK#	Bill Stall 2343 Wickham Circle Corple: LA 52241		25	
1015/09	CK# 389フ	Karen and David Fesler 1524 Forest Rd Corplyille TA 52241		50	
10/9/09	ID# 6294 CK# 1202	carpenters Local 1260 705 S Clinton St. Iown City ID SZZYO		500	
१०१५	ID# GK#	Cinda Edge · Ounlap 2112 13th St. Cocalville TA SZZYI		20	
10/14/09	id# ck# 2267	Doug and Lori Wenzel 70 Butternut Ct. Town City IA 52246		250	
10/19/09	CK#	Jerry Szczech 2807 Broken Roads Dr Loval ville IA Szzyj		25	
10/24/09	ID# CK#	Deboral Coen 3602 Wakonda Dr Bettendonf TA 52722		25	
			SUB-TOTAL	s1470	
		TOTAL (if last page	of this schedule)	S	

Discipaire law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as cardidate, but there is no familial relationship, enter 'not applicable' in the relationship column.

Page 1 of 3

For Instructions, See Back of Form	Reset Form	SCHEDULE	· · · · · · · · · · · · · · · · · · ·
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		, —	CK THIS BOX IF NDING FORM
Bill Hoeft City Council Campaign		1	

STATE CAMBIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE). LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CALIPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL. THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 688.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/26/09	ID# CK#	Catherine Grawe 1908 Southridge Dr Coralville 1AU 52741 Cedar Rapids and Iowa City Building Trules Council 5000 J St SW, Cedar Rapids TA 52404		\$ 25	
10/19/09	ID# 9680 CK# 5166	Cedar Rapids and Ioun City Building Trule Council 5000 J St SW, Cedar Rapids JA 5240		1000	
9/8/09	ID# CK#	Biu Hoeft 2307 Muddy Creck Ln Coralville TA 52241		50	
	CK#				
	ID# CK#				
	ID# CK#	:			
	ID# CK#				
	ID# CK#		,		
	ID# CK#			•	
	ID# CK#				
		TOTAL (If last page	SUB-TOTAL	s1075	

"Disclosure law requires candidate committees to disclose the relationantp of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by mamage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM	FOR	INST	RUCTIO	NS. SEE	BACK	OF F	ORM
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Resei	Form	
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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

319-358-8952

Bill Hock City Council Campaign

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (IJ applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6 5 09	ID# CK#	Pay Pal. com	net bank Fees on Paypal receipts	s 0.90
6/19/09	٠,	Print Pelican.com	campaign brochures	530.76
10/12/09		Pay Pal. com	ret bank fees on Paypal donation receipts	0.88
10/24/09	10	IOWA City Press Citizen IOWA City, IA	AJ in 10/28/09 Press Citizen	899.00
	CK#			
	ID#			
, <u></u>	ID# CK#			
	CK#			
			SUB-TOTAL YOTAL (if last page of this schedule)	\$1431.54 \$1431.54

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property coating \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and towa Code 68A.402(3)(I).)

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319-358-8952

FOR INSTRUCTIONS, SEE BACK OF FORM		SCHEDULE	
COMMITTEE NAME (Must be some as on Statement of Organization) Bill Hooft City Council Campuign		(Rev. 06/97)	IN-KIND CONTRIBUTIONS
	Reset Form		(THIS BOX IF DING FORM

OATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE '(il applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	VIFFOR FUND-RAISER CONTRIBUTION
717/09	COVAIVILLE TH 52241	self	from Sportsware Corally illy	s : 33 <i>8</i> ,00	
5112/09	Bill Hoeff 1907 muddy Creek Ln Carply the IA 52241	self	web hosting	111.74	
5/2409	Bill Hoeft 2307 Muddy Creek La corrlydk IA 52241	self	voter list on CO	13.00	
5/11/01	8:11 Hoeft 2-307 Mudey Creek Ln Corplett: IA 52241	se If	paper and lubel voter 1, st	244.15	
9/27/09	Jebb and Jill Dodds 1400 12th Ave Coralville IA 52241		envelopes, 11k and card stock	원1.82	
6/27/09	Teff and Jill Dods 1400 12th Ave Corpluille TA 52241		banners for 4th of July parade	40.28	
6/29/09	Jeff and JUI Dodds 1400 12th Ave Corpluite DA 52241		materials for 44 of Tuly FLOAT	25. <i>57</i>	
6/4/09	Jeff and Jill Dolls 1400 12+4 Ave Coralville TA 52241		materials for 4+h of July -float	74.53	
9/4/09	William Hoeft 2307 Muddy Creek Laws COTALUITE TA 52241	se IF	Yard signs	255.yg	
			SUB-TOTAL	s 1184.78	
			TOTAL (II last page of this schedulo)	1194.78	

*Disclosure law requires candidates to disclose the relationship of any relative making on in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule E)